

**APPLICATION – VOLUNTEER APPOINTMENT**

\_\_\_\_\_ New (Entire form)  
\_\_\_\_\_ Reappointment (Part I only)

**PART I**

NAME: \_\_\_\_\_ E-MAIL : \_\_\_\_\_

ADDRESS: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

Consideration for appointment to \_\_\_\_\_

(Commission, Board, Committee)

I understand that appointment to the above stated commission, board, or committee authorizes me to serve as a volunteer or advisor to the City of Taylorsville, and as such I further understand that I have no authority to bind the city or impose any conditions on the City or its citizens.

Signed: \_\_\_\_\_

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**PART II**

PROFESSIONAL/EMPLOYMENT SUMMARY:

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COMMUNITY SERVICE SUMMARY:

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OTHER TRAINING OR QUALIFICATIONS:

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PERSONAL STATEMENT REGARDING DESIRE TO BE APPOINTED:

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Submitted to for Approval:

Date: \_\_\_\_\_ By: \_\_\_\_\_  
(Mayor or City Council Chairman)

Action by City Council: Approved \_\_\_\_\_  
(Yes) (No)

Attest: \_\_\_\_\_  
(Recorder)